

Standardized Program Evaluation Protocol (SPEP) Findings

Report Completed by the Division of Criminal and Juvenile Justice Planning

Date of Review: January 2015 Juveniles in Cohort: 142

Basic Score: 54 / 85

Program Optimization Percentage: 64%

Program: Name Used by Agency SPEP Service Type: Social Skills Training Organization: Agency Name

Cohort Timeframe: Services ended Calendar Year 2012

Introduction

The Standardized Program Evaluation Protocol (SPEP) is a tool derived from meta-analytic research that is designed to compare existing juvenile justice services to the characteristics of the most effective services found in the research. A scoring system allows providers to identify areas in which adjustments can be made to improve the effectiveness of their service at reducing the recidivism of the juvenile offenders served.

This report provides two types of SPEP scores, a Basic Score and a Program Optimization Percentage (POP). The Basic Score compares the service to other intervention services found in the research, regardless of type. It is meant as a reference for the expected overall recidivism reduction when compared to other service types. The POP is a percentage score that indicates where the service is compared to its potential effectiveness if optimized to match the characteristics of similar services found effective in the research. The POP score is likely the more meaningful score for providers as it represents how close the service is to its potential for that type. For example, a POP Score of 55% would indicate that the service is running at 55% of the potential effectiveness for recidivism reduction that has been found for a similar type of service with research evidence of effectiveness.

Service Description

Aiding students in developing pro-social decision-making skills is an integral focus of our organization through challenging current value systems, cause/effect, delaying immediate gratification, educating and practicing healthy choices. Skills classes are taught by Skill Development staff with which the students have developed relationships. Staff are viewed as the role models and educators for students to safely work on their issues and treatment needs. Students benefit from the frequent practice of general living skills, such as: housekeeping, budgeting and financial preparation, daily life scheduling, positive self-expression and sociallyage appropriate hygiene techniques. The normative culture aids in the development of accountability within each dormitory. With staff and peer group guidance, the students also explore and develop their spirituality, inner strengths and personality.

Sources: Agency contact name

Score Detail by SPEP Component

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1. Service Type	Basic Score – 20/20	POP Score - 100%

The program was awarded 15 points for being identified as a Group 3 Service – Social Skills Training. This group of services is based on the premise that individuals who lack appropriate social skills may be perceived as threatening, disruptive, or otherwise deviant. Interpersonal skill building is a treatment technique focusing on developing the social skills required for an individual to interact in a positive way with others. The basic skills model begins with an individual's goals, progresses to how these goals should be translated into appropriate and effective social behaviors, and concludes with the impact of the behavior on the social environment. Typical training techniques are instruction, modeling of behavior, practice and rehearsal, feedback, reinforcement. May also include training in a set of techniques, such as conflict resolution or decision making, that focus on how to effectively deal with specific types of problems or issues that an individual may confront in interacting with others.

There is no qualifying supplemental service available. As a result, an additional **5 points** was automatically added to the score. This is the maximum amount of points that can be achieved in this category.

Sources: Agency contact name

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2. Quality of Service	Basic Score – 10/20	POP Score - 50%

Points are awarded based on information received in the areas below. **Bold type** indicates the findings within each area, while the Basic and POP Scores for Quality of Service are a reflection of all four areas combined.

Protocol (level = high – medium – low - none)

What a High Level would look like: Written protocols that explicitly lay out how each session is to be delivered; script/outline for each session, the order in which the sessions should be delivered, and frequency as well as the suggested duration of service. Written protocols reviewed and updated within the last three years.

Recommendation – Determine if written materials include explicit directions for how sessions should be delivered – outlines for sessions, order, frequency, duration of delivery and resource materials to be used, etc.

Staff Training (level = high – medium – **low** - none)

What a High Level would look like: Supervisors and delivery staff trained in the specific intervention. Minimum education requirements are met by all staff and/or credentials/licensing of delivery staff are known to be Masters level or above. Recertification or booster training is required and all training is consistently documented.

Recommendation – Make booster training a requirement at regular intervals (e.g. annually) for delivery staff as well as supervisors.

On-going Staff Supervision (level = high – medium – low - none)

What a High Level would look like: Evidence of a an established plan for systematic monitoring of staff for adherence to written protocols, which occurs at pre-determined time frames and provides written feedback to staff. Evidence of corrective action taken if/when needed and performance evaluations are based in part on adherence to protocols.

Recommendation – Document a plan for systematic monitoring of staff for adherence to written protocols that occurs at pre-determined time frames and provides written feedback to staff (e.g. individual and/or group supervision and/or annual performance evaluations).

Organizational Response to Drift (level = high - medium - low - none)

What a High Level would look like: Existing procedures for determining departure from protocols and corrective action, as well as documentation of its systematic use. Evidence of corrective action taken if/when adherence is found to be problematic. Documentation of client feedback received and analyzed consistently. Evidence of other evaluations/peer reviews solicited.

Recommendation – Formalize and document the corrective action process (e.g. create policy and procedures around issues of progressive discipline for staff). Schedule regular collection and analysis of client feedback that asks specifically about this service and explore evaluation of this service from outside the agency.

Sources: Agency contact name

3. Amount of Service	Basic Score - 6/20	POP Score - 30%
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Points are awarded based on information received in the 2 areas outlined below.

Research indicates that each SPEP service type is associated with a target amount of service exposure. Treatment or service effect is optimized when duration and contact hour targets are reached.

Duration: 6 / 10 points

SPEP research indicates that the Social Skills Training service type should have a target duration of 16 weeks. Of the 142 youth sampled, 91 (65%) reached the target of at least 16 weeks.

Contact Hours: 0 / 10 points

SPEP research indicates that the Social Skills Training service type should have a target of 24 hours. 16/142 youth (12%) in the program have achieved the recommended dosage.

Recommendation – Investigate the cause for the low contact hours within the amount of service category to determine any rectifiable cause. Duration could also be explored, but was less problematic.

Sources: Agency contact name

4. Risk Level of Cohort	Basic Score - 18/25	POP Score - 72%
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The risk level score is compiled by calculating the total % of juveniles who score above Low Risk to reoffend and also the total % of juveniles who score above Moderate Risk to reoffend based on the results of the Iowa Delinquency Assessment* (IDA). It is important to note that the IDA is delivered by Juvenile Court staff. IDA scores are a necessary component of the SPEP score, but may not be obtainable if a current short-form assessment has not been completed by the courts.

For the Name Used by Agency cohort, 90/142 juveniles (64%) scored above Low Risk (i.e. moderate or high) for a score of **5 points** and 67/142 (48%) scored above Moderate Risk (i.e. high) for a score of **13 points**.

Juveniles in the Risk Level cohort:

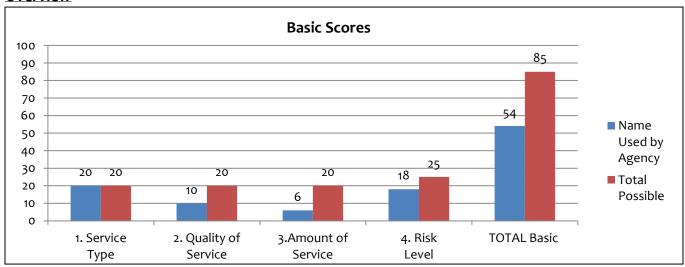
Low= 5 Moderate = 23 High = 67 No Risk Score= 47 TOTAL = 142

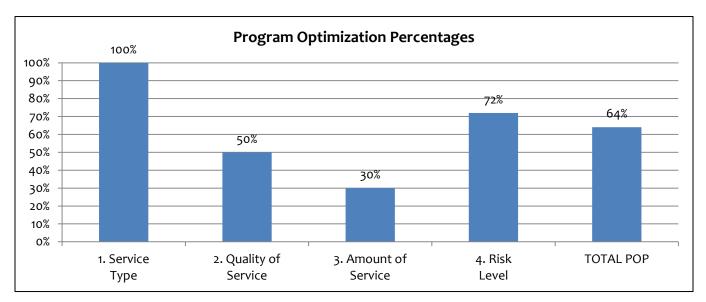
Recommendation – The IDA risk level is not completed by Organization Name staff and is outside of their direct influence; therefore no recommendations will be made regarding absent risk scores.

Sources: Data collected from the Justice Data Warehouse, which houses Iowa Court Information System data.

^{*}Short form IDA scores were reviewed during a period 6 months prior to admit and 30 days after admit.

Overview





Recommendations to Maximize Recidivism Reduction

- Determine if written materials include explicit directions for how sessions should be delivered –outlines for sessions, order, frequency, duration of delivery and resource materials to be used, etc.
- Make booster training a requirement at regular intervals (e.g. annually) for delivery staff as well as supervisors.
- Document a plan for systematic monitoring of staff for adherence to written protocols that occurs at predetermined time frames and provides written feedback to staff (e.g. individual and/or group supervision and/or annual performance evaluations).
- Formalize and document the corrective action process (e.g. create policy and procedures around issues of progressive discipline for staff).
- Schedule regular collection and analysis of client feedback that asks specifically about this service and explore evaluation of this service from outside the agency.
- Investigate the cause for the low contact hours within the amount of service category to determine any rectifiable cause. Duration could also be explored, but was less problematic.
- The IDA risk level is not completed by *Organization Name* staff and is outside of their direct influence; therefore no recommendations will be made regarding absent risk scores.